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FROM: Dr. Lola A. Bartoszewicz, Ph.D. / (416) 595 1155 ext. 200

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Under the Penerwork Reduction Act of 1995, no persons	Application Number	10/881,639		
	Filing Date	October 8, 2003		
TRANSMITTAL	First Named Inventor	Ohwol Shi		
FORM	Art Unit	1645		
	Examiner Name			
(to be used for all correspondence after initial filling)	Attorney Docket Number			
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	LOSURES (Check all	that apply)		
Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement	Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Terminal Disclaimer Request for Refund  CD, Number of CD(s)  Landscape Table on Coarks	on Address	Appeal C of Appeal Appeal C (Appeal N Proprieta Status L4	wance Communication to TC communication to Board is and interferences communication to TC lotice, Brief, Reply Brief) ary Information enter actosure(s) (please identify
SIGNATURE	OF APPLICANT, ATT	ORNEY, OR AG	ENT	
Signature Sim & McBurney  Printed name Dr. Lola A. Bartoszewicz	of ferre			
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Application of Information unless it stabilities over a valid OMB control number.

Application Number October 8, 2003 Filing Date REVOCATION OF POWER OF Qinwel Shi First Named Inventor ATTORNEY WITH NEW POWER OF ATTORNEY Art Unit 2 (Christian Con. Examiner Name AND CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number. Please change the correspondence address for the above-identified application to: The address associated with 24223 Customer Number: **QR** Dr. Lola A. Bertoszewicz Sim & McBurney Firm or Individual Name 330 University Avenue Address M5G 1R7 State Ontario Taronto City Canada Country 416 595 1183 416 595 1155 Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Qjrwai Šhi 905-731-9483 Name Telephone NOTE: Signatures of gill the Inventors or essignoes of record of the entire Interest or their topresentative(s) are required. Submit multiple forms if more from one होद्रातद्वीपान् वि स्वत्योग्दर्व, स्वतः क्रियोज्यः

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## Declaration and Power of Attorney For Patent Application

English Language Declaration As a below named inventor, I hereby declare that My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plans) names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DIAGNOSTIC DEVICES the specification of which (check one) is attached hereto. as United States Application No. or PCT International was filed on 10/08/2003 Application Number 10/681,639 and was amended on (if applicable) I hereby state that I have reviewed and understand the contents of the above identified specification. including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 GFR 1.58, including for continuation-in-part applications, material information which became available between the filling date of the prior application and the national or PCT international filling date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or plant breaders rights certificate(s), or 355(a) of any POT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. Priority Not Claimed Prior Foreign Application(s)  $\dot{\Box}$ (Pay/Month/Year Filed) (Country)-(Number) (Day/Month/Year Filed) (Country) (Number) (Day/Month/Xear Filed) (Country) (Number)

Form PTO-SB-01:(9-95) (Modified)

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50/417,794	10/11/2002	
(Application Serial No.)	(Filing Date)	
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U.S.C. Section 112, I acknowled Office all Information known to Section 1.56 which became avail	ige the duty to disclose to the me to be material to pateritab able between the filing date of	rovided by the first paragraph of 35 United States Patent and Trademark lifty as defined in Title 37, C. F. R. the prior application and the national
(Application Serial No.)	(Filing Date)	(Status)
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(Application Serial No.)  (Application Serial No.)  I hereby declare that all state statements made on information were made with the knowledge	(Filing Date)  (Filing Date)  (Filing Date)  ments made herein of my or and ballet are believed to be to that willful false statements and the Souther 1001 of Title 18 of	(patented, pending, abandoned) (Status) (patented, pending, abandoned)
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OWER OF ATTORNEY: As a named inventor, I bereby appoint the following gent(s) to prosecute this application and transact all business in the Patent an ornected therewith: (list name and tegistration number)	attomey(s) and/or d Trademark Office
Dr. Lola A. Bartoszewicz; Registration number 43394	
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Dr. Lois A. Barteszewicz	
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Toronto, Ontario MSG 1R7 Canada	
Direct Telephone Calls to: (name and telephone number)	
Dr. Lola A. Bartoszewicz at 416 595 1155 ext. 200	
Full name of sole-or first-inventor	· · · · · · · · i
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Sole or first inventor a signature	Dalo Horil 20 2005
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